FORM D

SEC Mail Processing Section

JAN 10 2008

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

142		33	5
ОМВ	APPR	OVAL	
OMB Num	ber:	323	5-0076
Expires: Estimated	April	30.2	:008
Estimated	averag	e burc	len
hours per r	espon:	SO	.16.00

SEC USE ONLY								
Prefix	Serial							
DA	E RECEIVED							
	1							

Washington, DC 104	SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMP	TION DATE RECEIVED
Name of Offering (check	if this is an amendment and name has changed, and indicate change.)	
Shop It To Me, Inc. Series	A Preferred Stock Financing	
Filing Under (Check box(es) th Type of Filing: New Fi	at apply): Rule 504 P Rule 505 Rule 506 Section 4(6) ling Amendment	□ ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information req	uested about the issuer	
Name of Issuer (check if Shop It To Me, Inc.	this is an amendment and name has changed, and indicate change.)	08020983
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2269 Chestnut Street, #25	0, San Francisco, CA 94123	15.630.4130
Address of Principal Business (if different from Executive Of	• • • • • • • • • • • • • • • • • • • •	Telephone Number (Including Area Code)
Brief Description of Business		
Online shopping service		PROCESSED
Type of Business Organization Corporation business trust	<u> </u>	JAN 2 2 2008
Actual or Estimated Date of In Jurisdiction of Incorporation of	Month Year corporation or Organization: 0 7 0 5 Actual Estimate Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a 	class of equity securities of the issuer.
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partners. 	artnership issuers; and
 Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Graham, Charles S.V.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Shop It To Me, Inc., 2269 Chestnut Street, #250, San Francisco, CA 94123	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	·
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	·

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Yes No				,		B. I	NFORMAT	ION ABOU	T OFFERI	NG				
2. What is the minimum investment that will be accepted from any individual?	1.	Has the	issuer sold	l, or does th	ne issuer in	itend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ing?	•••••		
3. Does the offering permit joint ownership of a single unit?					Ans	wer also ir	Appendix	, Column 2	, if filing	under ULC	E.			
3. Does the offering permit joint ownership of a single unit?	2.	What is	the minim	um investn	ent that w	ill be acce	pted from a	any individ	lual?				\$	0
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar renumeration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, our may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3.	Does the offering permit joint ownership of a single unit?												
commission or similar renuncration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed as an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	4.												_	_
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Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	Name (l	Last name	first, if indi	ividual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bus	iness or l	Residence .	Address (N	lumber and	l Street, C	ity, State, Z	Zip Code)	· · · · · · · · · · · · · · · · · · ·					
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Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
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Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)														
Business or Residence Address (Number and Street, City, State, Zip Code)		[RI]	[SC]	[SD]	TN	[TX]	UT	VT	[VA]	[WA]	[WV]	WI	[WY]	[PR]
	Full	l Name (l	Last name	first, if indi	ividual)									- 1
Name of Associated Broker or Dealer	Bus	iness or	Residence	Address (N	Number an	d Street, C	city, State, 2	Zip Code)						
	Nar	ne of Ass	ociated Br	oker or De	aler							 		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						· · · · · · · · · · · · · · · · · · ·
(Check "All States" or check individual States)		(Check	"All States	or check	individual	States)		***************************************		*************************			□ A)	l States
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IL IN IA KS KY LA ME MD MA MI MN MS MO														
MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR														

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate Offering Price	Amount Already Sold
	Type of Security	Offering Price	
	Debt	****	\$
	Equity	999,999.84	\$ 999,999.84
	Common Preferred		
	Convertible Securities (including warrants)	Š	\$
	Partnership Interests	3	\$
	Other (Specify)		
	Total	999,999.84	\$ 999,999.84
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	12	\$ 999,999.84
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_40,000.00
	Accounting Fees	_	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	_	\$
	Total		\$ 40,000.00

	C. OFFERING PRICE, NUMB	ROCEEDS		
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — (proceeds to the issuer."			\$
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ 200,000.00	√ \$ 400,000.00
	Purchase of real estate	[□ s
	Purchase, rental or leasing and installation of mach		\$	
	Construction or leasing of plant buildings and faci	lities		
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	¬;	□\$
	Repayment of indebtedness			_
	Working capital	-		
	Other (specify):			
			\$	
	Column Totals		\$ 210,000.00	┌ \$ 789,999.84
	Total Payments Listed (column totals added)			
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the inature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accordance.	ish to the U.S. Securities and Exchange Commis	sion, upon writte	
Iss	uer (Print or Type)	Signature /	Date	
Sh	op It To Me, Inc.	-7 V. II 1	December 28, 20	007
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Cha	rles S.V. Graham	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE									
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No X							
	See Appendix, Column 5, for state response.									
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be en limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer classified of this exemption has the burden of establishing that these conditions have been satisfied.									
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beh thorized person.	alf by the	undersigned							
lssuer (Print or Type) Signatura Date		•							
Shop It	To Me, Inc. December 28,	2007								

Title (Print or Type)

President

Instruction:

Name (Print or Type)
Charles S.V. Graham

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 5 2 4 1 3 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) investors in State offered in state (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Accredited Non-Accredited Investors Yes No State Yes No Amount Investors Amount ΑL ΑK AZAR CA Preferred stock, 11 \$949,999.97 0 × \$0.00 \$9<u>49 999 97</u> CO CTDE DC FL GA Ш ID 1 \$49,999.87 \$0.00 IL × Preferred stock, 0 X 40,000,07 IN IA KS KY LA ME MD MA MI MN MS

APPENDIX 2 4 1 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach Type of investor and explanation of to non-accredited offering price investors in State offered in state amount purchased in State waiver granted) (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Investors Investors Yes No State Yes No Amount Amount MO MT NE NV NH NJ NM × X NY NC ND OH OK OR PA RISCSD TN TX UT VT VA WA WV

WI

	APPENDIX									
1		2	3			5 Disqualification				
	to non-a	l to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

